APPLICATION DATA SHEET

Application Information

Application Number::	
Filing Date::	March 16, 2004

Application Type:: Regular Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: OPTICAL DETECTION LIQUID HANDLING

ROBOT SYSTEM

Attorney Docket Number:: 033719-004

Request for Early Publication?:: No Request for Non-Publication?:: No Suggested Drawing Figure:: 2
Total Drawing Sheets:: 4

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency:: Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Ronald

Middle Name:: J.

Family Name:: Wegrzyn

Name Suffix::

City of Residence:: Walnut Creek

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 751 Woodwind Place

City of Mailing Address:: Walnut Creek

State or Province of Mailing Address:: CA

Country of Mailing Address:: US

Postal or Zip Code of Mailing

Address:: 94598

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Alexander

Middle Name:: A.

Family Name:: Khorlin

Name Suffix::

City of Residence:: Mountain View

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 150 Pacchetti Way

Claims priority to	Provisiona	l Application	60/455,519	03/17/2003	
			Application::	Date::	
Application::	Continuity	y Type::	Parent	Parent Filing	
Domestic Priority	nformation			-	
Representative Custom	ner Number::	21839			
Representative Inf	ormation				
Fax Number:		(650) 622-24	199		
Phone Number::		(650) 622-2300			
Correspondence Custo	mer Number::	21839			
Correspondence II	nformation				
Address::		94040			
Postal or Zip Code of N	l ailing				
Country of Mailing Add	ress::	US			
State or Province of Ma	ailing Address::	CA			
City of Mailing Address	::	Mountain Vie	ew		

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name:: QIAGEN Operon, Inc.

Street of Mailing Address:: 1000 Atlantic Avenue, Suite 108

City of Mailing Address:: Alameda

State or Province of Mailing Address:: CA

Country of Mailing Address:: US

Postal or Zip Code of Mailing

Address:: 94501